



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Bruce A. Rogers :

Application No.: 10/763,447 :

: Group Art Unit:3732

Filed: January 23, 2004 :

: Examiner: S. L. Willatt

For: :

:

Attorney Docket No.:08859-0009C

I, <u>John F. Letchford</u>, Registration No. <u>33,328</u>, certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 14, 2005.

John F. Letchford

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

REQUEST FOR WITHDRAWAL AS ATTORNEY

Enclosed herewith is a request by the undersigned to withdraw as Attorney of record in the above-referenced application.

Respectfully submitted,

Date: July 14, 2005

John F. Letchford

Registration No. 33,328

Archer & Greiner A Professional Corporation One Centennial Square P.O. Box 3000 Haddonfield, NJ 08033-0968

Tel.:(856) 354-3013

Fax: (856) 795-0574

E-mail: jletchford@archerlaw.com

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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS

Application Number	10/763,447				
Filing Date	January 23, 2004				
First Named Inventor	Bruce A. Rogers				
Art Unit	3732				
Examiner Name	S.L. Willatt				
Attorney Docket Number	08859-0009C				

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450											
Please	Please withdraw me as attorney or agent for the above identified patent application, and										
all the attorneys/agents of record.											
the attorneys/agents (with registration numbers) listed on the attached paper(s), or											
the attorneys/agents associated with Customer Number											
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.											
The reasons for this request are: The client has indicated to me that he is unable to pay my fees for legal services going forward.											
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1. The correspondence address is NOT affected by this withdrawal.											
2. Change the correspondence address and direct all future correspondence to:											
The address associated with Customer Number:											
OR											
	m <i>or</i> lividual Name	Bruce A. Rogers									
Address 715 North Sixth Street Apartment 3F											
City Philadelphia		State	PA				Zip	19123			
Country	ountry USA										
Telephone 267-975-8887)						Email ba.rogers@comcast.net					
Signature		\mathcal{L}									
Name John F. Letchford					Registration No. 3			33,328			
Date	9 July 14, 2005					Telephone No. 8			856-354-3013		
		then approved rather than when reco						approval	of withdi	rawal and the expiration	

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